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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture		government-issued ire identification (for nple, your driver's ise or passport).	Samantha First name  Lyn Middle name	First name  Middle name
	identification to your meeting with the trustee.		Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		Samatha Edmonds	
		ide your married or den names.		
3.	you num Indi	the last 4 digits of r Social Security sber or federal vidual Taxpayer tification number	xxx-xx-1651	

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Debtor 1 Samantha Lyn Kraft

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs		
5.	Where you live	1914 E. Senca Lane	If Debtor 2 lives at a different address:		
		Mount Prospect, IL 60056  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Cook			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		3049 N. Huntington Dr			
		Arlington Heights, IL 60004  Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Debtor 1 Samantha Lyn Kraft

Case number (if known)

Par	Tell the Court About	Your E	Bankruptcy Ca	ise				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	<b>■</b> C	Chapter 7					
			Chapter 11					
			Chapter 12					
			Chapter 13					
3.	How you will pay the fee	•	about how yo	ou may pay. Typio attorney is subm	cally, if you are paying the fee yo	ck with the clerk's office in your local court for more burself, you may pay with cash, cashier's check, calf, your attorney may pay with a credit card or ch	or money	
					<b>allments.</b> If you choose this opti (Official Form 103A).	on, sign and attach the Application for Individuals	to Pay	
			but is not req	uired to, waive yo	our fee, and may do so only if yo	n only if you are filing for Chapter 7. By law, a jud our income is less than 150% of the official poverty n installments). If you choose this option, you mus	y line that	
						cial Form 103B) and file it with your petition.	st iiii out	
9.	Have you filed for bankruptcy within the	■ N	0.					
	last 8 years?	☐ Y	es.					
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being	■ N	0					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Y	es.					
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	□N	o. Go to I	ine 12.				
	residence:	■ Y	es. Has yo	our landlord obtain	ned an eviction judgment agains	st you and do you want to stay in your residence?		
			•	No. Go to line 1	2.			
				Yes. Fill out <i>Init</i> bankruptcy petit		Judgment Against You (Form 101A) and file it wit	h this	

Document Page 4 of 49 Case number (if known) Debtor 1 Samantha Lyn Kraft Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

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Debtor 1 Samantha Lyn Kraft

Case number (if known)

Part 5:

**Explain Your Efforts to Receive a Briefing About Credit Counseling** 

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credi	t
counseling because of:	

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 49 Case number (if known) Debtor 1 Samantha Lyn Kraft Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under □ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5**0,001-100,000 **5001-10,000** □ 50-99 owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 □ 200-999 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion ■ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion ■ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Samantha Lyn Kraft Signature of Debtor 2 Samantha Lyn Kraft Signature of Debtor 1 Executed on August 16, 2017 Executed on

MM / DD / YYYY

MM / DD / YYYY

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Debtor 1 Samantha Lyn Kraft Page 7 01 49

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ David (	Gallagher	Date	August 16, 2017
Signature of	f Attorney for Debtor		MM / DD / YYYY
David Gal	lagher		
Upright La	aw LLC		
Firm name			
79 West N	lonroe		
Fifith Floo	or		
Chicago, I	IL 60603		
	, City, State & ZIP Code		
Contact phone	312-546-4264	Email address	dgallagher@uprightlaw.com
6295024			
Bar number & S	State		

		Dodani	7HL 1 44C C C1 +3					
ill in this information to identify your case:								
Debtor 1	Samantha Lyn Kraft							
	First Name	Middle Name	Last Name					
Debtor 2								
Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS					
Case number _								

☐ Check if this is an amended filing

12/15

## Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		V	
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	12,850.85
	1c. Copy line 63, Total of all property on Schedule A/B	\$	12,850.85
Pa	t 2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	21,206.00
	Your total liabilities	\$	21,206.00
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,159.39
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,104.00
Pa	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

5,040.61 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	2,515.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	2,515.00

Case 17-24549 Doc 1 Filed 08/16/17 Entered 08/16/17 15:44:34 Desc Main Page 10 of 49 Document Fill in this information to identify your case and this filing: Debtor 1 Samantha Lyn Kraft Middle Name First Name Last Name Debtor 2 Middle Name First Name Last Name (Spouse, if filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Toyota Who has an interest in the property? Check one Make: 3 1 the amount of any secured claims on Schedule D: Rav 4 Creditors Who Have Claims Secured by Property. Model: ■ Debtor 1 only 2007 Debtor 2 only Current value of the Current value of the 132.000 entire property? Approximate mileage: Debtor 1 and Debtor 2 only portion you own? Other information: ☐ At least one of the debtors and another Value According to KBB \$3,950.00 \$3,950.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$3,950.00 pages you have attached for Part 2. Write that number here.....=>

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

Official Form 106A/B Schedule A/B: Property

	Case 17-24549	Doc 1	Filed 08/16/17 Document	Entered 08/16/17 1 Page 11 of 49	5:44:34	Desc Main
Debtor 1	Samantha Lyn Kraft		Document	Case num	ber (if known)	
■ Yes.	Describe					
	Househ	nold Goods	and Furnishings			\$1,700.00
□ No	les: Televisions and radios; including cell phones, c  Describe			pment; computers, printers, scar	ners; music c	collections; electronic devices
Example No	bles of value	paintings, prin		oks, pictures, or other art objects	s; stamp, coin	
Example No	ent for sports and hobbie les: Sports, photographic, ex musical instruments		ther hobby equipment;	bicycles, pool tables, golf clubs,	skis; canoes	and kayaks; carpentry tools;
■ No	ms  oles: Pistols, rifles, shotguns  Describe	s, ammunition,	, and related equipmer	nt		
□ No	oles: Everyday clothes, furs Describe	, leather coats	, designer wear, shoes	s, accessories		
	Necess	sary Wearing	g Apparel			\$475.00
□ No	ples: Everyday jewelry, cost  Describe	tume jewelry, e	engagement rings, wed	lding rings, heirloom jewelry, wat	ches, gems, (	gold, silver \$175.00
Exam <sub>l</sub> □ No	orm animals  oles: Dogs, cats, birds, hors  Describe	ees				
	One Do	og				\$0.00
■ No	ther personal and househo		did not already list, i	including any health aids you o	lid not list	
	the dollar value of all of yo art 3. Write that number ho			nny entries for pages you have	attached	\$2,650.00

Official Form 106A/B Schedule A/B: Property

page 2

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Case number (if known) Debtor 1 Samantha Lyn Kraft Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Yes. Cash on hand at time of \$0.00 filing 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes..... Chase Bank Account Ending: #2182 \$250.00 Savings Jointly owned with mother \$0.85 Chase Bank Account Ending: #8304 17.2. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Institution name: Type of account: 401(K) **Fidelity** \$6,000.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

Official Form 106A/B Schedule A/B: Property page 3

No

		Case 1	7-24549	Doc 1	Filed 08/16/17 Document	Entered 08/16/17 15:44:34 Page 13 of 49	Desc Main
De	ebtor 1	Samantha	Lyn Kraft		Doddinent	Case number (if known)	
	☐ Yes		Issuer name	and descripti	on.		
			<b>ation IRA, in a</b> I), 529A(b), ar		n a qualified ABLE pro	ogram, or under a qualified state tuition pro	gram.
	Yes		Institution na	me and desc	ription. Separately file th	ne records of any interests.11 U.S.C. § 521(c):	
	■ No	-	future intere		ty (other than anythin	g listed in line 1), and rights or powers exe	rcisable for your benefit
	Example ■ No	les: Internet of		, websites, p	ts, and other intellecturoceeds from royalties a	ual property and licensing agreements	
	Example ■ No	les: Building	·	sive licenses,		n holdings, liquor licenses, professional licens	es
			information at	out them			
Mo	oney or p	roperty owe	ed to you?				Current value of the portion you own?  Do not deduct secured claims or exemptions.
	■ No	unds owed to	-	out them, inc	luding whether you alre	ady filed the returns and the tax years	
	■ No	les: Past due	or lump sum a		isal support, child suppo	ort, maintenance, divorce settlement, property	settlement
	Example ■ No	les: Unpaid w benefits;	•	y insurance p	payments, disability ben someone else	efits, sick pay, vacation pay, workers' compe	nsation, Social Security
	Example	<b>s in insuran</b> /es: Health, d		insurance; h	ealth savings account (	HSA); credit, homeowner's, or renter's insurar	nce
	□ No ■ Yes. N	Name the ins		ny of each po pany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
			Tern	n Life Insur	ance with Employe	<u> </u>	\$0.00
	If you a someor	re the benefi ne has died.			someone who has die t proceeds from a life in	ed surance policy, or are currently entitled to rece	eive property because
	Example ■ No	les: Accidents			vou have filed a lawsu urance claims, or rights	it or made a demand for payment s to sue	

	Case 17-24549	Doc 1 F	Filed 08/16/17 Document	Entered 08 Page 14 of	3/16/17 15:44:34	Desc Main
Debt	or 1 Samantha Lyn Kraft		Document		Case number (if known)	
	ther contingent and unliquidat No Yes. Describe each claim		ery nature, includin	g counterclaims o	of the debtor and rights to	set off claims
35. <b>A</b>	ny financial assets you did not	t already list				
	No	,				
	Yes. Give specific information					
	Add the dollar value of all of yo for Part 4. Write that number h				-	\$6,250.85
Part 5	Describe Any Business-Related	l Property You Ov	vn or Have an Interest I	n. List any real esta	te in Part 1.	
37. <b>D</b> o	you own or have any legal or equi	itable interest in a	any business-related pr	operty?		
	No. Go to Part 6.					
	Yes. Go to line 38.					
Part 6	Describe Any Farm- and Common If you own or have an interest in fa	ercial Fishing-Rel armland, list it in Pa	lated Property You Own art 1.	or Have an Interes	t In.	
46. <b>D</b>	o you own or have any legal or	r equitable inter	rest in any farm- or o	ommercial fishin	g-related property?	
I	No. Go to Part 7.					
[	Yes. Go to line 47.					
Part 7	Describe All Property You	Own or Have an I	nterest in That You Did	Not List Above		
	o you have other property of a Examples: Season tickets, country					
	No					
Ц	Yes. Give specific information	•••••				
54.	Add the dollar value of all of yo	our entries fron	n Part 7. Write that n	umber here		\$0.00
Part 8	List the Totals of Each Part	of this Form				
55.	Part 1: Total real estate, line 2					\$0.00
56.	Part 2: Total vehicles, line 5			\$3,950.00		
57.	Part 3: Total personal and hou	sehold items, li	ine 15	\$2,650.00		
58.	Part 4: Total financial assets, li	ine 36		\$6,250.85		
59.	Part 5: Total business-related	property, line 4	5	\$0.00		
	Part 6: Total farm- and fishing-		y, line 52	\$0.00		
61.	Part 7: Total other property no	t listed, line 54	+	\$0.00		
62.	Total personal property. Add lir	nes 56 through 6	51	\$12,850.85	Copy personal property to	stal <b>\$12,850.85</b>
63.	Total of all property on Schedu	ule A/B. Add line	e 55 + line 62			\$12,850.85

Official Form 106A/B Schedule A/B: Property page 5

		DUCUITIC	IIL FAUC IS UL43	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Samantha Lyn Kı	aft		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Ide	entify the	Property You	u Claim as	Exempt
-------------	------------	--------------	------------	--------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che			
2007 Toyota Rav 4 132,000 miles Value According to KBB	\$3,950.00		\$2,400.00	735 ILCS 5/12-1001(c)	
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit		
2007 Toyota Rav 4 132,000 miles Value According to KBB	\$3,950.00		\$1,550.00	735 ILCS 5/12-1001(b)	
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit		
Household Goods and Furnishings Line from Schedule A/B: 6.1	\$1,700.00		\$1,700.00	735 ILCS 5/12-1001(b)	
			100% of fair market value, up to any applicable statutory limit		
Used Electronics Line from Schedule A/B: 7.1	\$300.00		\$300.00	735 ILCS 5/12-1001(b)	
Line nom conequie / v Z.			100% of fair market value, up to any applicable statutory limit		
Necessary Wearing Apparel Line from Schedule A/B: 11.1	\$475.00		\$475.00	735 ILCS 5/12-1001(a)	
Elito Holli Goziodalo 7VB. TTT			100% of fair market value, up to any applicable statutory limit		

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Case number (if known)

Debt	on annantha Lyn Krait				
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Costume Jewelry ine from Schedule A/B: 12.1	\$175.00		\$175.00	735 ILCS 5/12-1001(b)
•	and noin deficult A.B. 12.1			100% of fair market value, up to any applicable statutory limit	
	Savings: Chase Bank Account Ending: #2182	\$250.00		\$250.00	735 ILCS 5/12-1001(b)
,	Jointly owned with mother Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	Checking: Chase Bank Account Ending: #8304	\$0.85	5 ■ \$0.85		735 ILCS 5/12-1001(b)
	Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
	401(K): Fidelity Line from Schedule A/B: 21.1	\$6,000.00		100%	735 ILCS 5/12-1006
'	Lille Hotti Schedule A/B. 21.1			100% of fair market value, up to any applicable statutory limit	
	Are you claiming a homestead exemption Subject to adjustment on 4/01/19 and every  No  Yes. Did you acquire the property cove	3 years after that for ca	ases fi	ŕ	,
	□ No □ Yes				
	<b>–</b> 100				

		20001110	10 100 21 01 10	
Fill in this infor	mation to identify your	case:		
Debtor 1	Samantha Lyn Kı	raft		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

## Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

	Odde 17 24040 B	Document	Page 18	3 of 49	0.44. <b>0</b> 4 <b>D</b> 00	o man
Fill in th	nis information to identify your c					
Debtor 1	Samantha Lyn Kra	nft				
	First Name	Middle Name	Last Name		_	
Debtor 2		ACT III AL				
(Spouse if,	filing) First Name	Middle Name	Last Name			
United S	States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS		_	
Case nu	ımber					
(if known)						heck if this is an
					a	mended filing
Officia	al Form 106E/F					
	dule E/F: Creditors WI	ho Have Unsecured	Claims			12/15
	nplete and accurate as possible. Use			Part 2 for creditors wi	th NONDRIORITY clair	
Schedule eft. Attac name and	G: Executory Contracts and Unexpir D: Creditors Who Have Claims Secu h the Continuation Page to this page case number (if known).	red by Property. If more space is r e. If you have no information to rep	needed, copy t	he Part you need, fill	it out, number the ent	tries in the boxes on the
Part 1:	List All of Your PRIORITY Uns					
_	ny creditors have priority unsecured	ciaims against you?				
	lo. Go to Part 2.					
Dort O		/ Un an arread Claims				
Part 2:	List All of Your NONPRIORITY					
_	ny creditors have nonpriority unsecu					
ЦN	o. You have nothing to report in this pa	rt. Submit this form to the court with y	your other sche	edules.		
Y	es.					
unse	all of your nonpriority unsecured cla cured claim, list the creditor separately one creditor holds a particular claim, lis 2.	for each claim. For each claim listed,	, identify what t	ype of claim it is. Do no	ot list claims already inc	luded in Part 1. If more
						Total claim
	Amex	Last 4 digits of acco	ount number	5233		\$4,496.00
	Nonpriority Creditor's Name			Onened 40/42	Loot Active	
	Correspondence Po Box 981540	When was the debt	incurred?	Opened 10/13 6/19/17	Lasi Active	
_	El Paso, TX 79998					-
	Number Street City State Zlp Code	As of the date you f	ile, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.	_				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and anot	По	IIY unsecured	d claim:		
	Check if this claim is for a comm	<u> </u>				
	debt Is the claim subject to offset?	☐ Obligations arising report as priority clain		ration agreement or di	vorce that you did not	
	■ No			g plans, and other sim	ilar debts	
	□ yes	Other Specify	•			

Document Page 19 of 49 Debtor 1 Samantha Lyn Kraft Case number (if know) 4.2 Capital One Last 4 digits of account number 8699 \$0.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 12/08 Last Active When was the debt incurred? Po Box 30253 5/13/10 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Card 4.3 **Chase Card** Last 4 digits of account number 2017 \$666.00 Nonpriority Creditor's Name Attn: Correspondence Dept Opened 07/16 Last Active Po Box 15298 When was the debt incurred? 2/05/17 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.4 **Chase Card** Last 4 digits of account number 5713 \$0.00 Nonpriority Creditor's Name Attn: Correspondence Dept Opened 10/09 Last Active Po Box 15298 When was the debt incurred? 4/06/11 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed

debt

■ No

☐ Yes

Type of NONPRIORITY unsecured claim:

■ Other. Specify Credit Card

 $\square$  Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

☐ At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

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Desc Main Page 20 of 49 Document Debtor 1 Samantha Lyn Kraft Case number (if know) 4.5 Comenity Bank/Carsons Last 4 digits of account number 0992 \$1.617.00 Nonpriority Creditor's Name Opened 01/15 Last Active Po Box 182789 When was the debt incurred? 2/03/17 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Charge Account 4.6 Comenity Bank/Torrid \$697.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 07/14 Last Active Attn: Bankruptcy Po Box 182125 When was the debt incurred? 2/18/17 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account 4.7 **Dept Of Ed/Navient** Last 4 digits of account number 0329 \$1,625.00 Nonpriority Creditor's Name Opened 03/10 Last Active Attn: Claims Dept P.O. Box 9635 When was the debt incurred? 6/15/17 Wilkes Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only

☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans  $\square$  Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify Educational

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Debtor 1 Samantha Lyn Kraft Case number (if know) 4.8 Dept Of Ed/Navient Last 4 digits of account number 0329 \$890.00 Nonpriority Creditor's Name Opened 03/10 Last Active Po Box 9635 When was the debt incurred? 6/15/17 Wilkes Barre, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify **Educational** 4.9 **Discover Financial** Last 4 digits of account number 4868 \$8,248.00 Nonpriority Creditor's Name Opened 08/11 Last Active Po Box 3025 When was the debt incurred? 2/19/17 New Albany, OH 43054 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes Synchrony Bank/AVB Buying 4.1 0939 \$1,408.00 Last 4 digits of account number Group Nonpriority Creditor's Name Attn: Bankruptcy Opened 11/13 Last Active Po Box 956060 When was the debt incurred? 2/13/17 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Charge Account

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Debtor 1 Samantha Lyn Kraft

Case number (if know)

Target	Last 4 digits of account number	7361	\$1,559.00
Nonpriority Creditor's Name C/O Financial & Retail Srvs Mailstopn BT POB 9475	When was the debt incurred?	Opened 06/15 Last Active 2/18/17	
Minneapolis, MN 55440  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card		

### Part 3: List Others to Be Notified About a Debt That You Already Listed

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				-	Γotal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				•	Total Claim
	6f.	Student loans	6f.	\$	2,515.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	18,691.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	21,206.00

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

		Dodding	TILL T GGC ZO OT TO	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Samantha Lyn Kı	aft		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

I	Person or	company with	n whom you have the o	contract or lease	State what the contract or lease is for
2.1					
	Name				<del>-</del>
	Name				
	Number	Street			
	City		State	ZIP Code	<del>-</del>
2.2					
	Name				_
	Name				
	Number	Street			_
	City		State	ZIP Code	_
0.0	City		State	ZIF Code	
2.3					_
	Name				
	Number	Street			_
	Number	Sireei			
				710.0	_
	City		State	ZIP Code	
2.4					
	Name				_
					_
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				
	1401110				
	Number	Street			_
	City		State	ZIP Code	_
	y				

		Docume	nt Page 24 d	of 49	
Fill in this	information to identify your	case:			
Debtor 1	Samantha Lyn Kı	aft			
	First Name	Middle Name	Last Name		
Debtor 2		M: 1 II N			
(Spouse if, fill	ng) First Name	Middle Name	Last Name		
United Sta	ites Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case num	her				
(if known)		<del></del>		☐ Check if this is an	
				amended filing	
O((; - ; -	I = 400I I				
	I Form 106H				
Sched	lule H: Your Cod	ebtors		12/1	5
your name	e and case number (if known)  you have any codebtors? (If	. Answer every question.		to this page. On the top of any Additional Pages, write as a codebtor.	.e
<b>=</b>					
■ No □ Ye:					
⊔ Ye:	5				
	hin the last 8 years, have you na, California, Idaho, Louisiana,			ry? (Community property states and territories include nington, and Wisconsin.)	
■ No	. Go to line 3.				
☐ Ye	s. Did your spouse, former spou	use, or legal equivalent live	with you at the time?		
in line Form	e 2 again as a codebtor only i	f that person is a guarant	tor or cosigner. Make	r if your spouse is filing with you. List the person sho sure you have listed the creditor on Schedule D (Off 06G). Use Schedule D, Schedule E/F, or Schedule G t	icial
	Column 1: Your codebtor Name, Number, Street, City, State and Z	P Code		Column 2: The creditor to whom you owe the de Check all schedules that apply:	bt
2.1				Cahadula D. lina	
3.1	Name			□ Schedule D, line □ Schedule E/F, line	
				☐ Schedule C,I inte	
	Number Street			_	
	City	State	ZIP Code		
2.2				□ Sahadula D. lina	
3.2	Name			□ Schedule D, line □ Schedule E/F, line	
				☐ Schedule G, line	
-	Number Street				
	Number Street	State	ZIP Code		

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Fill	in this information to identif	fv vour cas	se:						
		antha Ly				_			
	otor 2 ouse, if filing)					-			
Uni	ted States Bankruptcy Cou	ırt for the:	NORTHERN DISTRIC	T OF ILL	INOIS	_			
	se number							_	stpetition chapter
	fficial Form 106 chedule I: You	_	ma				MM / DD/ Y		12/15
spo atta	plying correct information use. If you are separated ch a separate sheet to thing the control of	and your is form. O	spouse is not filing wi	th you, d	o not include inform	ation abo	ut your spo	use. If more s	space is needed,
1.	Fill in your employment information.	t		Debtor	1		Debtor 2	or non-filing	spouse
	If you have more than on		Employment status	■ Emp	oloyed		■ Emplo	yed	
	attach a separate page w information about addition		Employment status	☐ Not	employed		☐ Not er	nployed	
	employers.		Occupation	Purch	aser		Mechan	ic	
	Include part-time, season self-employed work.	nal, or	Employer's name	Whole	Foods		D and R	Auto Work	s
	Occupation may include sor homemaker, if it applies	ccupation may include student <b>Employer's address</b> homemaker, if it applies.		20281 N Rand Rd, Palatine, IL 60074			1454 Old Deerfield Rd, Highland Park, IL 60035		•
			How long employed the	here?	3 years		2	Months	
Pai	Give Details Ab	out Mont	hly Income						
	mate monthly income as use unless you are separate		e you file this form. If y	you have	nothing to report for a	ny line, wr	ite \$0 in the	space. Include	your non-filing
	u or your non-filing spouse e space, attach a separate			ombine the	e information for all er	nployers fo	or that perso	n on the lines I	pelow. If you need
						For D	ebtor 1	For Debtor non-filing s	
2.	List monthly gross wag deductions). If not paid n					\$	2,367.76	\$ 3,	,196.27

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

0.00

3,196.27

+\$

0.00

2,367.76

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Debt	tor 1	Samantha Lyn Kraft	_	C	Case	number (if kno	own)				
					For	Debtor 1		For	Debtor 2	) or	
					FOI	Deptor 1		non	-filing s	ouse	
	Cop	y line 4 here	4.		\$	2,367.	.76	\$		196.27	_
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$	325.	.06	\$		33.34	
	5b.	Mandatory contributions for retirement plans	5b		\$		.00	\$	<u> </u>	0.00	_
	5c.	Voluntary contributions for retirement plans	5c	:.	\$	165.		\$		0.00	_
	5d.	Required repayments of retirement fund loans	5d	١.	\$		.00	\$		0.00	_
	5e.	Insurance	5e	٠.	\$	256.	.46	\$		0.00	_
	5f.	Domestic support obligations	5f.		\$	0.	.00	\$		0.00	
	5g.	Union dues	5g		\$	0.	.00	\$		0.00	
	5h.	Other deductions. Specify: STD	5h	.+	\$_	24.	.02	+ \$_		0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	771.	.30	\$	(	633.34	_
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	1,596.	.46	\$	2,	562.93	_
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	8a		\$		.00	\$		0.00	
	8b. 8c.	Interest and dividends	8b	١.	\$_	0.	.00	\$		0.00	_
	8d.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation	8c 8d		\$_ \$		.00	\$_ \$		0.00	_
	8e.	Social Security	8e	٠.	\$		.00	\$		0.00	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  Pension or retirement income	e 8f. 8g		\$ \$		.00	\$ \$		0.00	_
	8h.	Other monthly income. Specify:	8h		<u>\$</u> _			+ \$_		0.00	_
	0					<u> </u>				0.00	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	<u> </u>	0.	.00	\$		0.0	0
10	Cald	culate monthly income. Add line 7 + line 9.	10.	2		1,596.46	<b>.</b> ¢	2 5	562.93	= \$	4,159.39
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		1,390.40	- Γ	2,	002.93	- <b>Ι</b> Ψ -	4,109.09
11.	Inclu othe	the all other regular contributions to the expenses that you list in Schedule adde contributions from an unmarried partner, members of your household, your friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:	depe		-	•			Schedule 11.		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certalies							12.	\$	4,159.39
13.	Do	you expect an increase or decrease within the year after you file this form	1?							Combi month	ned ly income
		No.									
	П	Yes, Explain:									

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	'- (h'- '- (	Carata idaa Com								
FIII	in this informa	tion to identify yo	our case:							
Deb	tor 1	Samantha Ly	yn Kraft			Cł	neck	if this is:		
								an amended filing		
l	otor 2 ouse, if filing)								ving postpetition cha the following date:	apter
(0)	odoo, ii iiiiiig)							o expenses as on	and ronowing date.	
Unit	ed States Bankr	uptcy Court for the	: NORTH	HERN DISTRICT OF ILLIN	OIS		N	MM / DD / YYYY		
Cas	e number									
(If kı	nown)									
Of	fficial Fo	rm 106J								
Sc	chedule	J: Your	Exper	ises						12/15
				. If two married people ar	e filing together, bo	oth are ed	nual	lly responsible fo	r supplying correc	
info	ormation. If m		eded, atta	ch another sheet to this						
Par		ibe Your House	hold							
1.	Is this a join	nt case?								
	■ No. Go to	line 2.								
	☐ Yes. <b>Doe</b>	s Debtor 2 live i	in a separ	ate household?						
	□ N	0								
	☐ Ye	es. Debtor 2 mus	st file Offici	ial Form 106J-2, <i>Expenses</i>	for Separate House	hold of D	ebto	or 2.		
2.	Do you have	e dependents?	■ No							
	•	•	_	Fill out this information for	Danandant'a ralati	anabin ta		Demandent's	Daga damandant	
	Do not list Do Debtor 2.	ebior i and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor			Dependent's age	Does dependent live with you?	
		th a							□ No	
	Do not state dependents								☐ Yes	
	•								□ No	
									☐ Yes	
									□ No	
									☐ Yes	
									□ No	
3.	Do your ove	enses include	_		-				☐ Yes	
ა.		f people other t	han	No						
		d your depende		Yes						
Par	t 2: Estim	ate Your Ongoi	na Monthi	ly Expenses						
				uptcy filing date unless y	ou are using this fo	orm as a	sup	plement in a Cha	pter 13 case to rep	ort
	enses as of a plicable date.	date after the l	bankruptc	y is filed. If this is a supp	lemental Schedule	J, check	the	box at the top of	f the form and fill i	n the
Incl	lude expense	s paid for with i	non-cash	government assistance i	f you know					
			d have inc	cluded it on Schedule I: \	our Income			Your expe	enses	
(Oii	ficial Form 10	юі.)					_	тош охро	711303	
4.	The rental o	r home owners	hip expen	ses for your residence.	nclude first mortgage		•		958.00	
	payments an	nd any rent for the	e ground o	or lot.		4.	\$		930.00	
	If not includ	led in line 4:								
	4a. Real e	state taxes				4a.	\$		0.00	
	•	rty, homeowner's				4b.	- 1		13.00	
			•	upkeep expenses		4c.			0.00	
5.		owner's associat		dominium dues <b>our residence,</b> such as ho	me equity loans	4d.	\$ \$		0.00	
J.	Additional	igage payiil	onito for yo	our residence, such as 110	ino oquity loans	٥.	Ψ		0.00	

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ebtor 1	Samantha Lyn Kraft	Case num	ber (if known)	
Util	ities:			
6a.	Electricity, heat, natural gas	6a.	\$	250.00
6b.	Water, sewer, garbage collection	6b.		0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	398.00
6d.	Other. Specify:	6d.	· ·	0.00
	d and housekeeping supplies	7.	· i — — — — — — — — — — — — — — — — — —	
			·	612.00
	dcare and children's education costs	8.	\$	0.00
	thing, laundry, and dry cleaning	9.	\$	125.00
	sonal care products and services	10.	\$	125.00
	lical and dental expenses	11.	\$	68.00
	nsportation. Include gas, maintenance, bus or train fare.	40	•	450.00
	not include car payments.	12.	*	450.00
. Ent	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	95.00
Cha	ritable contributions and religious donations	14.	\$	40.00
Ins	ırance.			
Do	not include insurance deducted from your pay or included in lines 4 or 20.			
15a	Life insurance	15a.	\$	0.00
15b	. Health insurance	15b.	\$	0.00
15c	Vehicle insurance	15c.	\$	130.00
	Other insurance. Specify: Non-filing spouse dental	15d.	·	50.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.		*	30.00
	es. Do not include taxes deducted from your pay of included in lines 4 of 20. cify:	16.	\$	0.00
			Ψ	0.00
	allment or lease payments:	17a.	<b>c</b>	0.00
	Car payments for Vehicle 1		·	0.00
	Car payments for Vehicle 2	17b.		0.00
	Other. Specify: Non-filing spouse car payment	17c.	·	325.00
17d	Other. Specify: Non-filing spouse minimum credit card payments	17d.	\$	325.00
	Student Loans		\$	65.00
Υοι	r payments of alimony, maintenance, and support that you did not report as	S	· -	
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
	er payments you make to support others who do not live with you.		\$	0.00
	cify:	19.	*	0.00
	er real property expenses not included in lines 4 or 5 of this form or on Sch		our Income	
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20c.	· -	
				0.00
	Maintenance, repair, and upkeep expenses	20d.		0.00
	Homeowner's association or condominium dues	20e.	·	0.00
Oth	er: Specify: Pet Care	21.	+\$	75.00
C-1	nulate your menthly expenses			
	culate your monthly expenses			4 46 4 66
	Add lines 4 through 21.		\$	4,104.00
22b	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c	Add line 22a and 22b. The result is your monthly expenses.		\$	4,104.00
				·
	culate your monthly net income.			_
	. Copy line 12 (your combined monthly income) from Schedule I.	23a.	·	4,159.39
23b	Copy your monthly expenses from line 22c above.	23b.	-\$	4,104.00
				•
23c	Subtract your monthly expenses from your monthly income.			FF 0.0
	The result is your monthly net income.	23c.	\$	55.39
				<u> </u>
	you expect an increase or decrease in your expenses within the year after y			
For	example, do you expect to finish paying for your car loan within the year or do you expect you			se or decrease because
For	example, do you expect to finish paying for your car loan within the year or do you expect you fication to the terms of your mortgage?			se or decrease because
For	example, do you expect to finish paying for your car loan within the year or do you expect you fication to the terms of your mortgage?			se or decrease because

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Fill in this infor	rmation to identify your	case:			
Debtor 1	Samantha Lyn Kr				
Debioi i	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing
If two married p You must file th obtaining mone		r, both are equally response. It bankruptcy schedules to connection with a ban	nsible for supplying co	rrect information. s. Making a false stateme	nt, concealing property, or r imprisonment for up to 20
Sig	ın Below				
Did you pa	ay or agree to pay some	one who is NOT an atto	rney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes.	Name of person				tcy Petition Preparer's Notice, d Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	nmary and schedules file	ed with this declaration a	nd
X /s/ Sai	mantha Lyn Kraft		x		
	ntha Lyn Kraft ure of Debtor 1		Signature o	f Debtor 2	
Date	August 16, 2017		Date		

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	in this inform	nation to identify you	r 00001							
Dei	otor 1	Samantha Lyn K	Middle Name	Last Name						
	otor 2 ouse if, filing)	First Name	Middle Name	Last Name						
Uni	ted States Ba	nkruptcy Court for the:	NORTHERN DISTRICT (	OF ILLINOIS						
	se number					Check if this is an amended filing				
Sta Be a info	as complete a	of Financial and accurate as possinore space is needed,	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup					
		n). Answer every que: Details About Your Ma	stion. arital Status and Where You	Lived Before						
1.		r current marital statu	ıs?							
	<ul><li>☐ Married</li><li>■ Not mail</li></ul>									
2.	During the last 3 years, have you lived anywhere other than where you live now?									
	■ No □ Yes. Lis	st all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>ı</i> .					
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there				
<b>3.</b> state					ity property state or territor ico, Texas, Washington and V					
	■ No □ Yes. Ma	ake sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).						
Par	t 2 Expla	in the Sources of You	r Income							
4.	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?				
	□ No ■ Yes. Fil	I in the details.								
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
	•	of current year untiled for bankruptcy:	■ Wages, commissions, bonuses, tips	\$19,250.17	☐ Wages, commissions, bonuses, tips					
			☐ Operating a business		☐ Operating a business					

Official Form 107

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Case 17-24549 Desc Main Document Page 31 of 49 Case number (if known) Debtor 1 Samantha Lyn Kraft Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$26,606.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$26,797.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. (before deductions each source Describe below. (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more?  $\square$  No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony, Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

attorney for this bankruptcy case.

Creditor's Name and Address Dates of payment **Total amount** Amount vou Was this payment for ... still owe paid

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Case number (if known) Debtor 1 Samantha Lyn Kraft

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.							
	Yes. List all payments to an insider.							
	. ,							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment		
8.	Within 1 year before you filed for bankruptor insider? Include payments on debts guaranteed or cost		ments or transfer a	any property on a	ccount of a d	lebt that benefited an		
	■ No □ Yes. List all payments to an insider							
	Insider's Name and Address	Dates of payment	Total amount	Amount you		this payment		
			paid	still owe	include cred	allor's name		
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures						
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.							
	Case title Case number	Nature of the case	Court or agency		Status of the	ne case		
	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below  ■ No. Go to line 11. □ Yes. Fill in the information below.	v.	erty repossessed, f		shed, attache			
	Creditor Name and Address	Describe the Property		Date		Value of the property		
		Explain what happened	i			р. оро. зу		
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca  ■ No □ Yes. Fill in the details.		luding a bank or fir	nancial institutior	n, set off any a	amounts from your		
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount		
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or all No Yes		erty in the possess			efit of creditors, a		
Par	t 5: List Certain Gifts and Contributions							
13.	Within 2 years before you filed for bankrup  ■ No	tcy, did you give any gift	s with a total value	of more than \$60	00 per person	?		
	Yes. Fill in the details for each gift.							
	Gifts with a total value of more than \$600 per person	Describe the gifts		Date: the g	s you gave ifts	Value		
	Person to Whom You Gave the Gift and Address:							

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Debt	for 1 Samantha Lyn Kraft			C	ase number (	f known)	
	Within 2 years before you filed for bankr ■ No □ Yes. Fill in the details for each gift or o			tributions	s with a total	value of more than	\$600 to any charity?
	Gifts or contributions to charities that is more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod		Describe what you contrib	outed		Dates you contributed	Value
Part	6: List Certain Losses						
-	Within 1 year before you filed for bankru or gambling?	ıptcy or si	nce you filed for bankrup	tcy, did yo	ou lose anyth	ning because of thef	t, fire, other disaster
	■ No						
	Yes. Fill in the details.						
	Describe the property you lost and how the loss occurred	Include th	e any insurance coverage ne amount that insurance has e claims on line 33 of <i>Scheo</i>	as paid. Li	st pending	Date of your loss	Value of property lost
Part	7: List Certain Payments or Transfers	•					
(	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition p	preparing	a bankruptcy petition?	-			rty to anyone you
	□ No						
	Yes. Fill in the details.						
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not \		Description and value of a transferred	any prope	erty	Date payment or transfer was made	Amount of payment
	Upright Law LLC 79 West Monroe Fifith Floor Chicago, IL 60603 dgallagher@uprightlaw.com		Attorney Fees			2/2017-5/2017	\$1,500.00
	Within 1 year before you filed for bankru promised to help you deal with your cre Do not include any payment or transfer tha	ditors or t	o make payments to your	•••	•	r transfer any prope	rty to anyone who
	■ No						
	Yes. Fill in the details.						
	Person Who Was Paid Address		Description and value of a transferred	any prope	erty	Date payment or transfer was made	Amount of payment
1	Within 2 years before you filed for bankr transferred in the ordinary course of you include both outright transfers and transfers include gifts and transfers that you have all	ur busines s made as	ss or financial affairs? security (such as the granti				
	Yes. Fill in the details.						
	Person Who Received Transfer Address		Description and value of property transferred			ny property or received or debts	Date transfer was made

Person's relationship to you

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Case number (if known)

Samantha Lyn Kraft Debtor 1

19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No  Yes. Fill in the details.						
	Name of trust	Description and v	alue of the propert	y transferred	Date Transfer was made		
Par	List of Certain Financial Accounts, In	struments, Safe Deposit	t Boxes, and Storaç	ge Units			
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso No  Yes. Fill in the details.	or other financial accou	nts; certificates of o				
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account of instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 cash, or other valuables?  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	year before you filed for Who else had acc Address (Number, s	eess to it? De	afe deposit box or other depos	Do you still have it?		
22.	Have you stored property in a storage unit  No Yes. Fill in the details.	State and ZIP Code)		r before you filed for bankrupt			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		scribe the contents	Do you still have it?		
Par	9: Identify Property You Hold or Control	I for Someone Else					
23.	Do you hold or control any property that so for someone.  No Yes. Fill in the details.	omeone else owns? Incl	ude any property yo	ou borrowed from, are storing	for, or hold in trust		
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		scribe the property	Value		
	10: Give Details About Environmental Inf						

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Samantha Lyn Kraft

24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?								
	No								
	Yes. Fill in the details.			<b>5</b>					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of	any release of hazardous material?							
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or adı	ministrative proceeding under any envir	ronmental law? Include settlements a	and orders.					
	No								
	Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Par	11: Give Details About Your Business or	Connections to Any Business							
27	Within 4 years before you filed for bankrup	toy did you own a husinoss or have an	y of the following connections to any	, husinoss?					
21.				business:					
	_	in a trade, profession, or other activity,	-						
	<u>_</u>	pany (LLC) or limited liability partnershi	p (LLP)						
	☐ A partner in a partnership								
	☐ An officer, director, or managing ex	ecutive of a corporation							
	☐ An owner of at least 5% of the votin	ng or equity securities of a corporation							
	■ No. None of the above applies. Go to	Part 12.							
	Yes. Check all that apply above and fil	I in the details below for each business.							
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security						
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed	number of fritt.					
	Samantha Lyn Kraft	Instacart	EIN: 1651						
	1914 E. Senca Lane Mount Prospect, IL 60056		From-To 9/2016-12/2016						
	Mount Prospect, it 60036		3/2010-12/2010						
28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties.	tcy, did you give a financial statement to	o anyone about your business? Inclu	ıde all financial					
	■ No								
	Yes. Fill in the details below.								
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued							

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Debtor 1 Samantha Lyn Kraft Page 30 01 49
Case number (if known)

Part 12: Sign Below

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

## Case 17-24549 Doc 1 Filed 08/16/17 Entered 08/16/17 15:44:34 Desc Main Document Page 37 of 49

Eill in this information to identify your case:  Debtor 1	
Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS  Case number (If known)  Check if the amended  Official Form 108  Statement of Intention for Individuals Filing Under Chapter 7  If you are an individual filing under chapter 7, you must fill out this form if: Creditors have claims secured by your property, or  you have leased personal property and the lease has not expired.  You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and less on the form  If two married people are filling together in a joint case, both are equally responsible for supplying correct information. Both deb sign and date the form.  Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional write your name and case number (if known).  Part 1:  List Your Creditors Who Have Secured Claims  1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D information below.  Identify the creditor and the property that is collateral  What do you intend to do with the property that  secures a debt?  Did you claim as exempt on	
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information below. Identify the creditor and the property that is collateral What do you intend to do with the property that secures a debt?  Did you claim as exempt on	, fill in the
secures a debt? as exempt on	
Creditor's ☐ Surrender the property. ☐ No	
name:	
☐ Retain the property and enter into a ☐ Yes	
Description of Reaffirmation Agreement.	
property	
Securing debt.	
Creditor's ☐ Surrender the property. ☐ No	
name: Retain the property and redeem it.	
☐ Retain the property and redecime. ☐ Yes	
Description of Reaffirmation Agreement.	
property	
securing debt:	
Creditor's ☐ Surrender the property. ☐ No	

Official Form 108

Creditor's

name:

property

Description of

securing debt:

Statement of Intention for Individuals Filing Under Chapter 7

 $\square$  Surrender the property.

☐ Retain the property and redeem it.

 $\hfill\square$  Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

☐ Yes

☐ No

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Debtor 1 Samantha Lyn Kraft		Case number (if	Case number (if known)		
name:		☐ Retain the property and redeem it.	☐ Yes		
Descrip	otion of	☐ Retain the property and enter into a Reaffirmation Agreement.			
propert	ty	Retain the property and [explain]:			
securir	ng debt:				
Part 2:	List Your Unexpired Personal Proper	ty Leases			
For any u	nexpired personal property lease that ormation below. Do not list real estate	you listed in Schedule G: Executory Contracts and Une leases. Unexpired leases are leases that are still in effe ty lease if the trustee does not assume it. 11 U.S.C. § 36	ct; the lease period has not yet ended.		
Describe	your unexpired personal property lea	ses	Will the lease be assumed?		
Lessor's r	name: on of leased		□ No		
Property:			☐ Yes		
Lessor's r	name: on of leased		□ No		
Property:			☐ Yes		
Lessor's r Description	name: on of leased		□ No		
Property:			☐ Yes		
Lessor's r Description	name: on of leased		□ No		
Property:			☐ Yes		
Lessor's r	name: on of leased		□ No		
Property:			☐ Yes		
Lessor's r	name: on of leased		□ No		
Property:			☐ Yes		
Lessor's r	name: on of leased		□ No		
Property:			☐ Yes		
Part 3:	Sign Below				
	nalty of perjury, I declare that I have in that is subject to an unexpired lease.	dicated my intention about any property of my estate th	nat secures a debt and any personal		
	Samantha Lyn Kraft	X			
	nantha Lyn Kraft nature of Debtor 1	Signature of Debtor 2			
Date	August 16, 2017	Date			

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-24549 Doc 1 Filed 08/16/17 Entered 08/16/17 15:44:34 Desc Main Document Page 43 of 49

B2030 (Form 2030) (12/15)

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3.

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7.

#### United States Bankruptcy Court Northern District of Illinois

In re	Samantha Lyn Kraft	C	ase No.	
	Debto	or(s)	hapter	7
	DISCLOSURE OF COMPENSATION O	F ATTORNEY F	OR DE	CBTOR(S)
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that compensation paid to me within one year before the filing of the petition be rendered on behalf of the debtor(s) in contemplation of or in connection	in bankruptcy, or agreed to	be paid	to me, for services rendered or to
	For legal services, I have agreed to accept	\$		1,500.00
	Prior to the filing of this statement I have received	\$		1,500.00
	Balance Due	\$		0.00
	\$335.00 of the filing fee has been paid.			
	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
	■ I have not agreed to share the above-disclosed compensation with any	y other person unless they	are memb	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a personal copy of the agreement, together with a list of the names of the people			
	In return for the above-disclosed fee, I have agreed to render legal service	e for all aspects of the ban	kruptcy c	ase, including:
	<ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the</li> <li>b. Preparation and filing of any petition, schedules, statement of affairs a</li> <li>c. Representation of the debtor at the meeting of creditors and confirmat</li> <li>d. [Other provisions as needed]</li> </ul>	and plan which may be req	uired;	

By agreement with the debtor(s), the above-disclosed fee does not include the following service:

(a) discharge proceedings, including those related to student loans, taxes or undue hardships; (b) motions for relief from, or continuation, defense or enforcement of the Automatic Stay (hourly); (c) motions to redeem personal property (\$600.00); (d) rule 2004 examinations (hourly); (e) motions to avoid liens/judgments (\$500.00); (f) contested matters or adversary proceedings (hourly); (g) contested matters regarding Client's claim of exempt property (hourly); (h) Amend any list, schedule, statement, and/or other document required to be filed with the petition as may be necessary or appropriate based on any omission by Client (hourly); (i) motions to continue the 341 meeting of creditors and/or appearing for a continued 341 hearing due to Client's failure to appear (\$150.00); (j) motions or adversary complaints to abandon/refinance/sell/purchase property (hourly); (k) assisting in carrying out the Debtor's Statement of Intentions (hourly); (I) monitoring an "asset case" (hourly); (m) re-opening a bankruptcy case to submit post-filing proof of pre-discharge counseling (\$355); (n) if permitted by local rule, each reaffirmation agreement review, negotiation, execution, appearance at reaf hearings (\$150); (o) issues that arise that are not specifically listed in the Agreement (hourly). Hourly rates billed at \$395.00 per hour for attorney time and \$125/hour for paraprofessional time billed in 6-minute minimum increments, however, the Firm will be entitled to contingency fee of 25% of garnishment/wage assignment recovery. Consumer Protection Violation Prosecution billed at a multiple of Firm's usual hourly rates, times the actual hours expended on this matter, or; b) \$1750 of the first \$2000 in total Recovery, plus 20% of the next \$3000 of Recovery, plus 30% of the

Firm loses a lawsuit brought on Client's behalf, then Client will not be obligated to pay a fee or costs.

next \$5000 of Recovery, plus 40% of the next \$15,000 of Recovery, plus 50% of the Recovery in excess of \$25,000, or; c) in the event Firm successfully pursues an FDCPA or TCPA claim, Client shall receive no less than \$250. If

All services not specifically excluded by 7 below to reasonably achieve the debtor's objectives.

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In re	Samantha Lyn Kraft	Case No.	
	Debto	(s)	

#### DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sneet)			
	CERTIFICATION		
I certify that the foregoing is a complete staten this bankruptcy proceeding.	nent of any agreement or arrangement for payment to me for representation of the debtor(s) in		
August 16, 2017	/s/ David Gallagher		
Date	David Gallagher		
	Signature of Attorney		
	Upright Law LLC		
	79 West Monroe		
	Fifith Floor		
	Chicago, IL 60603		
	312-546-4264 Fax: 844-402-1128		
	dgallagher@uprightlaw.com		
	Name of law firm		

#### ATTORNEY-CLIENT LEGAL SERVICES AGREEMENT FOR CHAPTER 7 BANKRUPTCY

This Agreement is executed between Upright Law LLC ("Firm") and the undersigned ("Client"). The undersigned Partner of Firm has authorized Firm to affix Partner's digital signature upon this Agreement ("Agreement"). Agreement is subject to Partner's further review and approval after consultation with Client. Agreement contemplates bankruptcy related services ("Services") ONLY and no other representation. The Partner will review this Agreement with Client, including which chapter of bankruptcy Client is eligible for.

- 1. Type of Bankruptcy Representation and Scope of Services. Client hires Firm (and not any specific attorney) to provide Services. Firm will immediately begin providing Services bill for all Services, including those provided before this Agreement is signed. Services include all representation to complete Client's legal matter, except Agreement does not include representation in any objection to discharge, adversary proceeding or any heavily contested matter or Services that could not have been contemplated after reasonable diligence by Firm when this Agreement was signed ("Additional Services"). Firm requires upfront payment for Additional Services, which are billed at \$395.00 per hour for attorney time (or the highest hourly rate permitted in Client's jurisdiction) and \$125.00 per hour for paraprofessional time billed in six-minute increments.
- 2. Type of Fee ("Fee"). Client hires Firm under a "FLAT FEE" Agreement whereby Firm agrees to provide Services for a fixed amount of \$ 1500.00 , plus the Bankruptcy Court filing fee of \$ 335.00 for a total Flat Fee of \$ 1835.00 ("Total Flat Fee"). Because this is a flat fee representation, Firm will not provide a monthly accounting. Fee is earned when paid and immediately becomes property of Firm. Fees will be placed into Firm's general expense/operating account and NOT into any Firm IOLTA client trust fund account. Client has sixty days from Client's final payment of Fees to turn in all requested documents or, if Firm has to spend additional time collecting documents due to Client's unreasonable delay, Client may be charged an additional Flat Fee of \$375.00, and any amounts on deposit with Firm to pay filing fees or other costs will be applied toward that \$375.00 Fee. No Chapter 7 petition will be filed until all Fees and costs are paid in full and Client provides all documents. The Flat Fee may increase if Client gives inaccurate information during the course of Firm's representation.
- 3. Payment Term and Authorization. Client may only use a debit card, but not a credit card to pay for Services. Client, who lives in zip code 60004 , is a duly authorized signor on the account ending in 4611 , expiring 1/19 . Firm is authorized to charge account ending in 4611 , the Total Flat Fee of \$ 1835.00 , by single/recurring debits. Client authorizes Firm to adjust debits as necessary to fully pay the Total Flat Fee. Client may cancel future payments only by written notice at least five days in advance. This authorization is effective until Client has paid the Total Flat Fee or has cancelled the authorization. Firm's authority to deduct funds from Client's account ceases upon payment in full of Total Flat Fee, and under no circumstances may the firm deduct funds from the client's account after the case has been filed. Firm is not responsible for damages/costs/fees related to authorized payments. Client will be charged \$25.00 for each bounced payment.

- **4. Virtual Representation.** Firm represents Client primarily through means of telephonic and online communication via email, phone or computer-based virtual meeting room, and not face-to-face at a physical office. Client has elected to use Firm, in part, because Client finds this service to be more efficient and convenient. Client has the right to meet with Partner in person at a mutually agreeable time and location.
- **5. Refund Policy.** If Client cancels, Client will be charged for all Services up to the date of cancellation. Firm will provide an accounting along with any unearned portion of the Fee.
- **6. Debtor's Obligations to Pay Credit Counseling/Debtor Education.** In addition to the Flat Fee, Client is obligated to obtain/pay for: (a) Pre-filing credit counseling and (b) post-filing debtor education instructional course.
- 7. Limited Power of Attorney. Client agrees that the signature on this contract also grants Firm a limited power of attorney to affix its signature to any authorization forms required to (a) obtain tax information from any third party tax preparer, accountant, state or federal taxing authorities or any other party in possession of any type of tax information/returns related to Client, including, but not limited to copies of Client's tax returns and/or transcripts, and (b) obtain due diligence products from third parties including, but not limited to, real estate appraisals and/or comparative market analyses, title searches, asset searches, personal property valuations, and credit reports.
- 8. I/WE UNDERSTAND THAT THE INFORMATION DISCLOSED IN THE PETITION IS GIVEN UNDER PENALTY OF PERJURY AND THAT THE FEDERAL PENALTY FOR PERJURY MAY INCLUDE IMPRISONMENT AND HEAVY FINES.

A Debt Relief Agency

Client: Samantha Edmonds
For Firm: /s/Dave Gallagher

**CLIENT(S):** 

DocuSigned by:

#### **United States Bankruptcy Court** Northern District of Illinois

		1 (of their District of Immors		
In re	Samantha Lyn Kraft		Case No.	
	-	Debtor(s)	Chapter <b>7</b>	
	VE	RIFICATION OF CREDITOR M.	ATRIX	
		Number of	Creditors:	11
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of creditor	ors is true and correct to	the best of my
Date:	August 16, 2017	/s/ Samantha Lyn Kraft Samantha Lyn Kraft Signature of Debtor		

Amex Correspondence Po Box 981540 El Paso, TX 79998

Capital One Attn: Bankruptcy Po Box 30253 Salt Lake City, UT 84130

Chase Card Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Chase Card Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Comenity Bank/Carsons Po Box 182789 Columbus, OH 43218

Comenity Bank/Torrid Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Dept Of Ed/Navient Attn: Claims Dept P.O. Box 9635 Wilkes Barr, PA 18773

Dept Of Ed/Navient Po Box 9635 Wilkes Barre, PA 18773

Discover Financial Po Box 3025 New Albany, OH 43054

Synchrony Bank/AVB Buying Group Attn: Bankruptcy Po Box 956060 Orlando, FL 32896

Target C/O Financial & Retail Srvs Mailstopn BT POB 9475 Minneapolis, MN 55440